



Center for Global Health Update

Satish Gopal MD MPH

*NCAB GLOBAL CANCER RESEARCH
SUB-COMMITTEE VIRTUAL MEETING*

A Reminder that CGH Turns 10 Next Year

...we have recently established the NCI Center for Global Health, which will develop an appropriate research strategy to help incorporate cancer control into global health programs; foster relevant research activities throughout the NCI's own extramural and intramural divisions; and work closely with the many potential collaborators who have displayed an interest in shared objectives.

Strikingly, many...questions are not only relevant to cancer in the developing world, they address problems that can be solved only by giving more attention to cancers in other parts of the globe.

COMMENTARY

POLICY

Integrating Cancer Control into Global Health

Harold Varmus* and Edward L. Trimble

Many in the global health community have recently proposed that current efforts be expanded to include diseases typically associated with advanced economies, such as heart disease, mental health disorders, diabetes, and cancers. Here, we discuss ways in which the National Cancer Institute's newly formed Center for Global Health plans to stem the rising cancer burden in developing countries.

Over the past two decades, the world's leading economies have given growing levels of attention to the health of people in low- and middle-income countries, with increasing evidence of success. These efforts to improve what is now called "global health" are founded, in part, on the conviction that better control of disease is generally a precondition, not just a consequence, of economic development; equally important, investments in global health are viewed as a manifestation of a nation's humanitarian concerns and a useful element in international relations (1-3).

The ambitions of the global health movement have recently broadened. In this Commentary, we describe how a newly formed Center for Global Health at the National Cancer Institute (NCI) can contribute to improved control of cancer throughout the world, even in the poorest countries (Fig. 1).

EXPANDING THE FOCUS OF GLOBAL HEALTH

Most of the action in the emerging field of global health has been directed at disease-related problems in developing countries that traditionally are considered to be the most common, the most important, or arguably the most solvable: infectious diseases (especially malaria, tuberculosis, and HIV/AIDS); maternal and infant mortality; and nutritional deficiencies. Recently, however, numerous commentators have noted the need to give greater attention to those chronic and generally noncommunicable diseases that are the major focus of medical prevention, care, and research in advanced economies—cardiovascular diseases, obesity and diabetes, cancers, and mental disorders (4-7). As one highly visible example of this change in perspective, the United Nations has convened a High Level Meeting (September 2011) on

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noncommunicable diseases (NCDs) in the developing world, the first time that this prestigious forum has focused on health issues other than HIV/AIDS (8).

This broadening of objectives is partly a response to the success of current global health programs. The lengthening of life spans in many poor countries has allowed more people to reach later life stages, during which NCDs are most common, and



Fig. 1. Combating cancer worldwide. NCI's new Center for Global Health promotes a collaborative effort to reduce the burden that cancers impose on people and countries around the world.

Other prevention strategies for control of tobacco and alcohol abuse entail behavioral changes that offer multiple, long-term health benefits, generally at a low cost.

Moreover, several kinds of cancer treatments that were thought to be prohibitively expensive for use in poor countries may now be affordable. For example, some effective cancer chemotherapies are no longer patent-protected, and the list will grow

alcohol, all of which raise the incidence of certain cancers. In 2008, ~7.6 million people died from cancer worldwide, and 64% percent of these deaths occurred in developing countries. These numbers are up from 2002, when there were 6.2 million cancer deaths, and only 55% percent were in the developing world (9, 10). By 2030, the number of cancer deaths may rise as high as 13.2 million, with 69% percent occurring in developing countries.

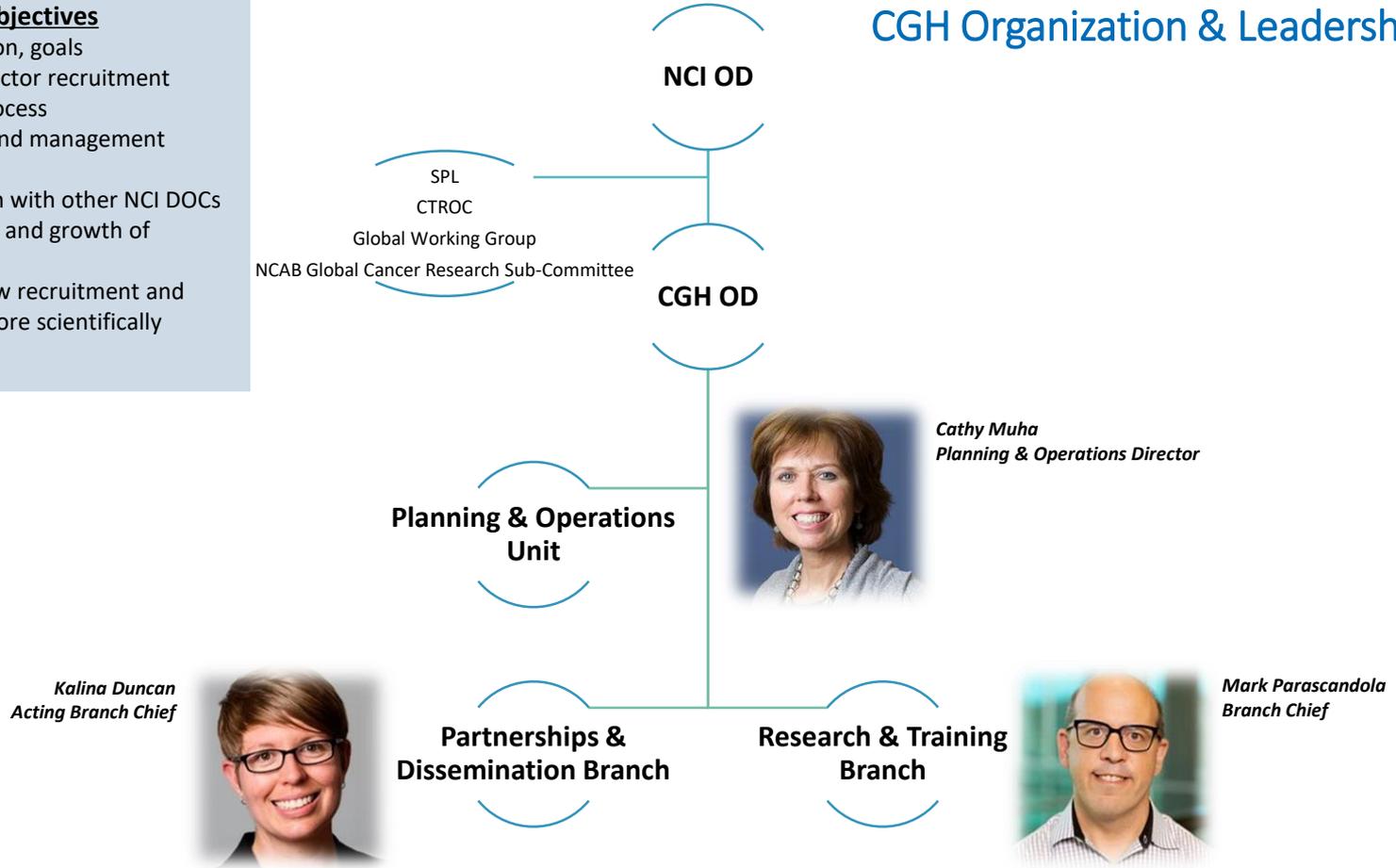
Until recently, proposals to screen for, treat, and even prevent cancers and other NCDs in developing countries have taken a back seat to plans for controlling the traditional targets of global health with measures—such as vaccines and antibiotics, obstetrical care, and food—deemed more affordable and more effective in resource-limited settings. However, while these measures remain important and incompletely implemented, they are increasingly recognized as only one part of what might be done to advance global health. Furthermore, the distinctions between traditional approaches to global health and those required to combat NCDs are not always clear-cut.

For instance, about a quarter of life-threatening cancers in the developing world result from infections with viruses, bacteria, and parasites—examples include liver cancers associated with hepatitis B virus (HBV) and hepatitis C virus, cervical cancer caused by human papillomavirus (HPV), gastric cancer caused by the bacterium *Helicobacter pylori*; Kaposi's sarcoma, nasopharyngeal carcinoma, and Burkitt's lymphoma induced by herpesviruses; bladder cancer resulting from infection with *Schistosoma*, a parasitic flatworm; and various cancers associated with HIV infection. For some of these, effective prevention measures already exist: vaccines against HPV and some strains of HPV that protect against hepatic and cervical cancer, respectively; antimicrobial drugs for the treatment of gastric ulcers caused by *H. pylori* to prevent gastric cancer; and methods to prevent infection by *Schistosoma* and consequent bladder cancer.

Transition period objectives

- Clarify mission, vision, goals
- Initiate Deputy Director recruitment through Title 42 process
- Improve planning and management capabilities
- Improve integration with other NCI DOCs
- Optimize utilization and growth of existing staff
- Target areas for new recruitment and growth toward a more scientifically vibrant center

CGH Organization & Leadership



A Refreshed NCI Center for Global Health

Mission

CGH supports the NCI mission by advancing global cancer research, and by coordinating NCI engagement in global cancer control.

Vision

Reduce worldwide cancer suffering through global scientific discovery and dissemination.

Goals

- Support innovative, impactful **research** that addresses key scientific issues in global cancer control and/or leverages unique scientific opportunities afforded by global collaboration.
- Support global cancer **research training**, particularly in low- and middle-income countries, that enables impactful global scientific collaboration.
- Promote the integration of current scientific knowledge in **global cancer control**.
- **Represent the NCI** and promote its engagement with key partners in global cancer control.

Recent Research & Training Initiatives (1)

- **Tobacco Cessation, HIV, and Comorbidities in LMICs (U01)** (*Mark Parascandola; RFA-CA-20-037*)
 - Bring together transdisciplinary teams to adapt tobacco cessation interventions for PLWH in LMICs
 - Applications due 9/24/2020, anticipating up to 4-5 awards FY21
 - Developed with OHAM, DCCPS
- **Dissemination and Implementation Science for Cancer Prevention and Control in Low-Resource Environments (R01/R03/R21)** (*Mark Parascandola; NOT-CA-20-025*)
 - First PAR application deadline 6/5/2020 following CGH NOSI
 - Developed with DCCPS and Global Alliance on Chronic Diseases
- **Administrative Supplement to Stimulate or Strengthen Global Cancer Health Disparities Research** (*James Alaro; NOT-CA-20-032*)
 - Applications reviewed, FY20 funding plan completed, awards in process
 - Parent grant distribution across NCI DOCs
 - Developed with CRCHD, DCCPS

Recent Research & Training Initiatives (2)

- **Harnessing Data Science for Health Discovery and Innovation in Africa (DS-I Africa; U01/U2C/U2R/U54)** *(Paul Pearlman; RFA-RM-20-015/016/017/018)*
 - Common Fund trans-NIH program with CGH coordinating NCI participation
 - Launch accompanied by Virtual Symposium Platform events July to October
 - Applications due 11/24/2020-12/8/2020
- **Strengthening Institutional Capacity to Conduct Global Cancer Research (D43)** *(Sudha Sivaram; RFA-CA-20-031)*
 - Addresses lack of dedicated global cancer research training support for US and LMIC scientists
 - Application due dates 7/24/2020, 6/24/2021
 - Anticipating up to 4 awards FY21, up to 3 awards FY22
 - Developed with OCC, CCT

Recent Partnership & Dissemination Activities

- **Project ECHO** (*Kalina Duncan, Mishka Cira*)
 - Virtual telementoring & dissemination platform
 - Cancer care & COVID in Africa series 4/2020-8/2020
 - ECHO with International Cancer Control Partnership for implementing national cancer control plans to launch 10/2020
 - ECHO with Union for International Cancer Control and Breast Health Global Initiative for breast cancer control 10/2020-4/2021
- **2018-2019 Global Oncology Survey of NCI-Designated Cancer Centers** (*Kalina Duncan, Mishka Cira, Rachel Abudu*)
 - Cancer Center Directors Virtual Annual Meeting 6/29/2020
- **ASCO-CGH Academic Global Oncology Meeting 6/25/2020**
- **8th Annual Symposium on Global Cancer Research 6/26/2020-8/12/2020**
- **International Cancer Research Partnership (with CRS)** (*Kalina Duncan, Rachel Abudu, Laura Prakash*)
- **International Cancer Screening Network (with DCCPS)** (*Doug Perin*)
- **Fogarty International Center**
 - Advisory Board 6/9/2020
 - Fellows & Scholars Orientation 7/15/2020



17 April 2020; Washington Hilton Hotel, Washington, DC

Co-Sponsors: Georgetown Lombardi Comprehensive Cancer Center, Johns Hopkins Sidney Kimmel Comprehensive Cancer Center, University of Maryland Greenbaum Comprehensive Cancer Center

In partnership with: ASCO, AACR, CUGH

March 2021 virtual meeting

<https://www.cugh.org>

<https://www.cancer.gov/about-nci/organization/cgh/events>

8th Annual Symposium on Global Cancer Research - Webinar Series

June-August, 2020

Due to the COVID-19 pandemic, the 8th Annual Symposium on Global Cancer Research (ASGCR), scheduled for April 17, 2020, was not held as an in-person Symposium. We are pleased to announce that the ASGCR Scientific Steering Committee is partnering with the Consortium of Universities for Global Health (CUGH) to present some of the timely scientific content from the Symposium through the CUGH global health webinar series.

26 June

Breast Health Global Initiative Cancer Supplement Launch Webinar: Improving Breast Healthcare Through Resource-Stratified Phased Implementation
Friday, 26 June 2020, 1-2PM US ET. Register [here](#) .

10 July

8th Annual Symposium on Global Cancer Research Selected Oral Abstract Presentations
Friday, 10 July 2020, 11AM-12PM US ET. Register [here](#) .

29 July

3-Part Series: Global Efforts to Reduce the Burden of Cervical Cancer: What Will it Take?
Session One: Overview of the global initiatives in cervical cancer control
Wednesday, 29 July 2020, 11AM-12PM US ET. Registration link pending.

05 August

3-Part Series: Global Efforts to Reduce the Burden of Cervical Cancer: What Will it Take?
Session Two: Latest scientific advances, tools, and approaches to address cervical cancer control at the country-level
Wednesday, 05 August 2020, 11AM-12PM US ET. Registration link pending.

12 August

3-Part Series: Global Efforts to Reduce the Burden of Cervical Cancer: What Will it Take?
Session Three: Ensuring effective implementation of cervical cancer prevention and control strategies
Wednesday, 12 August 2020, 11AM-12PM US ET. Registration link pending.

Research

- Mobile Health: Technology and Outcomes in LMICs (CGH, R21; R21/R33)
5 awards – Total NCI Support \$1,731,176 (FY17-FY20)
- International Tobacco and Health Research and Capacity Building Program (CGH, DCCPS; R01)
4 awards – NCI Support \$899,820 per year (FY16-FY20); >20 year NCI-Fogarty collaboration
- Global Environmental and Occupation (GEO) Health (DCCPS, CGH)
2 hubs in Peru and India – NCI support \$1 million per year; NCI staff serve as project collaborators
- Harnessing Data Science for Health Discovery and Innovation in Africa (DS-I Africa) (CGH)

Research training

- D43 Global Health Equity Scholars (CGH, OHAM)
3 awards; \$206,025 (FY19)
- K01 International Research Scientist Development Award (CGH)
3 awards; \$1,051,567 (FY16-FY20)
- K43 Emerging Global Leader (CGH, OHAM)
2 awards; \$317,949 (FY18-FY20)
- R25 Research Ethics
3 awards; \$593,948 (FY16-FY20)

Workshops

- Childhood Obesity Prevention Across Borders Workshop (CGH, DCCPS)
- Stigma in Global Health Workshops (CGH, DCCPS)
- Implementation Science Research Workshops/ Conference Sessions (CGH, DCCPS)
- Grant Writing Workshops

Envisioning CGH future

Plan & prioritize



- Improve internal processes for program development, prioritization, and evaluation
- Conduct formal internal strategic planning for external feedback solicitation in 2021

Integrate across NCI



- Adjunct appointments for CGH staff where appropriate
- Participate in trans-NCI working groups
- Co-develop programs with other NCI DOCs
- Chair trans-NCI Global Working Group
- Initiate trans-NCI Global Cancer Research Seminar Series and annual Mini-Retreat

Signature CGH initiatives



- Develop, implement, evaluate, evolve, and sustain impactful programs led by CGH
- Identify new global cancer program areas where key opportunities exist
- Recruit additional expertise within CGH to catalyze programs while drawing on expertise outside CGH

Improve service capabilities



- Facilitate MOU development
- Facilitate international collaboration opportunities
- Provide international grants management guidance
- Deploy and support overseas staff
- Support international trainees and those with global health interests
- Represent NCI with international partners

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